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| No. W 99658 | | Due no later than Jan 31, 2013 | | 2. Registered Agent and Address (NO PO BOX) | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | Annual Report Form 1. Mailing Address: Correct in this box if needed. ALL AUTOMOTIVE REPAIRS LLC MATTHEW LENORD PO BOX 140216 GARDEN CITY ID 83714 | | MATTHEW M LENORD 9172 W. MICHELE LN. #202 BOISE ID 83704 | |
| | | | | 3. <u>New</u> Registered Agent Signature:* | |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country Postal Code |
| MEMBER | VERONICA FRONEK | PO BOX 140216 | GARDEN CITY | ID | USA 83714 |
| 5. Organized Under the Laws of: ID W 99658 | | 6. Annual Report must be signed.* Signature: Matthew Lenord Name (type or print): Matthew Lenord Date: 11/20/2012 Title: Owner | | | |
| Processed 11/20/2012 | | * Electronically provided signatures are accepted as original signatures. | | | |